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CONFIRMATION NO. 7453

<b>SERIAL NUMBER</b> 10/824,950	<b>FILING OR 371(c) DATE</b> 04/15/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3766	<b>ATTORNEY DOCKET NO.</b> IT140824 (5024-00119)	
<b>APPLICANTS</b> Joel Q. Xue, Germantown, WI; G. Ian Rowlandson, Milwaukee, WI; David Albert, Oklahoma City, OK;					
<b>** CONTINUING DATA *****</b> <i>none - @ 06/26/06</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>none - @ 06/26/06</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/26/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance: <i>@ 06/26/06</i> Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 26753					
<b>TITLE</b> Method and apparatus for analysis of non-invasive cardiac parameters					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		